PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE perwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/777,418 TRANSMITTAL Filing Date February 6, 2001 First Named Inventor **FORM GRANT D. GREEN** Art Unit 1761 **Examiner Name** Steven L. Weinstein (to be used for all correspondence after initial filing) Attorney Docket Number

Total	Number of Page	ges in This Submission	23	Attorney Booker Humber	GDG01.US	51 					
ENCLOSURES (Check all that apply)											
	Fee Transmi	Attached		Drawing(s) Licensing-related Papers Petition			Appea of App	I Communication to TC I Communication to Board eals and Interferences I Communication to TC I Notice, Brief, Reply Brief)			
	After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Petition to Convert to a Provisional Application Power of Attorney, Revoca Change of Correspondent Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on		e Address		Proprietary Information Status Letter Other Enclosure(s) (please Identify below):				
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53			Remarks Appeal Brief in triplicate; copies of two references cited by Applicant, in triplicate. ATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Na	me	313117	1 OKL	✓	JINILI, C	IN AO					
Signatur Printed r	name	rant D. Green		2							
Date March 18, 2005				Reg. No.	31,259	259					
CERTIFICATE OF TRANSMISSION/MAILING											
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:											
Signature Add Add Add Add Add Add Add Add Add Ad											
Typed o	or printed par	Grant D. Green					Date	March 18, 2005			

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.	Complete if Known										
Effective on 12/08/2004. Les Rucciani to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number										
FEE TRANSMITTAL	Filing Date	6 February 2001									
For FY 2005	First Named Inventor	GRANT D. GREEN									
	Examiner Name	Steven L. Weinstein									
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1761									
TOTAL AMOUNT OF PAYMENT (\$) 1, 045	Attorney Docket No.	GDG01.US1									
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order Other (please identify):											
Deposit Account Deposit Account Number:	·										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
FEE CALCULATION											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
FILING FEES SEAI	RCH FEES EXA	MINATION FEES									
Small Entity Application Type Fee (\$) Fee (\$)	Small Entity 5) Fee (\$) Fee	Small Entity (\$) Fee (\$)	Fees Paid (\$)								
Utility 300 150 500	250 20										
Design 200 100 100	50 13	0 65									
Plant 200 100 300	150 16	0 80 _									
Reissue 300 150 500	250 60	0 300 _									
Provisional 200 100 0	0	0 0 _									
2. EXCESS CLAIM FEES			li Entity								
Fee Description Each claim over 20 (including Reissues)		<u>Fee (\$)</u> <u>Fo</u>	ee (\$) 25								
Each independent claim over 3 (including Reissues)		100									
Multiple dependent claims		360	180								
Total Claims	e Paid (\$)		Multiple Dependent Claims								
- 20 or HP = x = HP = highest number of total claims paid for, if greater than 20.		<u>Fee (\$)</u>	Fee Paid (\$)								
	e Paid (\$)										
3 or HP = x =											
HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50											
	sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
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SUBMITTED BY

Signature

Registration No. (Attorney/Agent) 31,259

Telephone 650-855-5311

Date March 18, 2005

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